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### S.D. SEC. OF STATE

# State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the PACs, political party, ballot question and othe	he office where you filed your nominating petition. r committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave, Pierre, SD 57501-5070
See pages 9 & 10 of the Guid completing this report.	eline Book for specific instructions on
Name of Candidate or Committe	ee SD Health Care Assoc. Political Action Comm.
	N Western Ave Sioux Falls, SD 57104-2071  Daytime
Name of Person Making Report	Mark B. Deak Phone (605)339-2071
If you are a candidate, what	office are you seeking
If you are a ballot question committee was involved with measure was supported or opp	committee, indicate which measure(s) the during the reporting period and whether the osed.
Type of Report (See pages 4	& 5 of Guideline Book) Pre-General Campaign Report
	(See pages 4 & 5 of Guideline Book) Oct. 26, 2002
	======================================
The following verification must be	completed before submitting report.
VERIFICATION OF PERSON MAKIN	IG REPORT
I Mark B. Deak	(print name legibly), certify
that I have examined this re	eport and to the best of my knowledge and
belief it is true, correct a	and complete.
	MA
Date: Oct. 26, 2002	Candidate Signature or Signature of Committee Treasurer or Chairperson
Revised July 2001	Filed this day of
	FILOCITORS I

SECRETARY OF STATE

Name of Candidate or Committee SD Health Care Assoc. Political Action	Comm.			
For the reporting period ending Oct. 26, 2002				
Schedule A - Direct Contributions				
This schedule is used for reporting all direct contributions. You must keep a record of all contributions but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and of the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual of the next page.	om n			

or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contribution	*\$ <u>1143.18</u>		
Itemized Contributions	I		
Name	Residence Address	Place of Employment (Name of Employer)	
See Attached Form			\$
			\$
			\$
<u> </u>	?		\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
1			\$
		<u> </u>	\$
			\$

\*\$ 3302.19

Total of Itemized Contributions from Individuals:

For the reporting period ending_	Oct. 26, 2002	
Schedule A - Dir	ect Contributions (continued)	
Unitemized Contributions from Po	litical Parties:	*\$ <u>*</u>
Itemized Contributions from Poli	tical Parties	
Party Name	Address	
		\$
		\$
Total of Itemized Contributions	from Political Parties:	
(All contributions from P PAC Name	AC's must be itemized.) Address	s
		\$ \$
	0	٠
		\$\$
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		s
		\$
		\$
		\$
		\$
		\$ \$
		\$\$ \$ *\$
		\$\$ \$\$ \$\$
		\$\$ \$\$ \$\$

## SCHEDULE A – DIRECT CONTRIBUTIONS

\$3302.19

Mary Knutson Charlie Ward Justin Hinker Daryl Reinicke Gary Peterson Lee Larson Linda Studer Scott Gloe Tammy Jenson Dave Simpson Mike Ward Jeanine Reed	\$101.00 \$179.58 \$120.00 \$336.10 \$397.47 \$395.71 \$750.00 \$145.00 \$209.29 \$181.80 \$125.24 \$125.00
	•

**TOTAL** 

Name of Candidate or Committee SD	Health Care Assoc. Political Action Comm.						
For the reporting period ending	Oct. 26, 2002						
Schedule B - Fun	d-Raising Events Proceeds						
List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.							
Type of Event	Net Proceeds						
Sales Events & Contests	\$765.58						
	Total: \$ 765.58						
	- V: C+: +:						
	In Kind Contributions						
Report all non-cash contributions of goods or ser exceeds \$100, the name of the contributor, reside	vices and the estimated fair market value. If the value ence address and place of employment must be reported.						
Nature of Non-Cash Contribution	Estimated Value Name of Contributor						
	Total: \$ 0						
	D 04 1						
Has this schedule to report any refunds, interest a	D - Other Income						
Ose this schedule to report any retunds, interest of	e D - Other Income earned or other income which is not a direct contribution.						
Source of Income	earned or other income which is not a direct contribution.  Amount						
• •	earned or other income which is not a direct contribution.						
Source of Income	earned or other income which is not a direct contribution.  Amount						
Source of Income	earned or other income which is not a direct contribution.  Amount						
Source of Income	earned or other income which is not a direct contribution.  Amount						

Name	of	Candidate	or	Com	nittee	-SD	Hea	<del>lth</del>	Care	Assoc.	Political	Action	Comm.
For	the	reporting	per	riod	ending	<u></u>	ct.	26,	2002		· · · · · · · ·		
					Sche	dule	E -	Exp	endi	tures			

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

			14		
Item	Amount	Contributions Ma	ade to (	Candidates a	and Committees:
Advertising		*See Attached Form			
Consulting		-			
Postage		-			
Printing		-	**,		
Rent		-			
Salaries		-			
Telephone		<del>-</del>			
Travel		_			
Utilities					
Other Expens	es:				

Other Expenses:

Bank Service Charges -\$2.20

#### SCHEDULE E - EXPENDITURES

Rounds Campaign	\$1000.00
Abbott Campaign	\$1000.00
Bartling Legislative Campaign	\$100.00
Burg Legislative Campaign	\$100.00
Frost Legislative Campaign	\$100.00
Frysle Legislative Campaign	\$100.00
Gillespie Legislative Campaign	\$100.00
Glenski Legislative Campaign	\$100.00
Gary Hanson Legislative Campaign	\$100.00
Hargens Legislative Campaign	\$100.00
Hennies Legislative Campaign	\$100.00
Henniew Legislative Campaign	\$100.00
Hundstad Legislative Campaign	\$100.00
Kloucek Legislative Campaign	\$100.00
Koistinen Legislative Campaign	\$100.00
Kooistra Legislative Campaign	\$100.00
Lange Legislative Campaign	\$100.00
McCracken Legislative Campaign	\$100.00
McCoy Legislative Campaign	\$100.00
McIntyre Legislative Campaign	\$100.00
Murschel Legislative Campaign	\$100.00
Nachtigal Legislative Campaign	\$100.00
Nesselhuf Legislative Campaign	\$100.00
Olson Legislative Campaign	\$100.00
Mel Olson Legislative Campaign	\$100.00
Jim Peterson Legislative Campaign	\$100.00
Putnam Legislative Campaign	\$100.00
ReedyLegislative Campaign	\$100.00
SebertLegislative Campaign	\$100.00
Sigdestad Legislative Campaign	\$100.00
Slaughter Legislative Campaign	\$100.00
Sutton Legislative Campaign	\$100.00
Smidt Legislative Campaign	\$100.00
Valandra Legislative Campaign	\$100.00
Van Norman Legislative Campaign	\$100.00
Wick Legislative Campaign	\$100.00
Adelstein Legislative Campaign	\$200.00
Begalka Legislative Campaign	\$200.00
Brown Legislative Campaign	\$200.00
Clark Legislative Campaign	\$200.00
Dennert Legislative Campaign	\$200.00
Flowers Legislative Campaign	\$200.00
Greenfield Legislative Campaign	\$200.00

#### LIST OF CANDIDATES AND AMOUNT DONATED

Van Etten Legislative Campaign	\$200.00
Van Gerpen Legislative Campaign	\$200.00
Solum Legislative Campaign	\$400.00
Heineman Legislative Campaign	\$400.00
Albers Legislative Campaign	\$400.00

TOTAL \$8400.00

\*

Name of Candidate or Committe	ee <u>SD Health C</u>	are Assoc. Pol	litical Action Com	m•			
For the reporting period end	ing Oct. 26, 20	02					
Schedu	le F - Debts an	d Obligations		4			
This schedule is to report all of the candid reporting period. If a service has been co	This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.						
Owed To	Purpose		Amount				
	£ .		· · · · · · · · · · · · · · · · · · ·				
		Total Obligat	ions: \$ <u>0</u>				

	e of Candidate or Committee SD Healt	-h Care Assoc. Politica	al Action Comm
For	the reporting period ending Oct. 2	26, 2002	
	Summary	y Page	
This Pleas	summary sheet will give a brief outline of all campa se transfer all totals from the schedules previously co	ign finance activity during this ampleted.	reporting period.
1.	Amount on hand, if any, at beginnin	g of reporting period	\$ <u>3425.93</u>
2.	Receipts		
	Schedule A - Direct Contributions	\$ 4445.37	
	Schedule B - Fund-Raising Events	\$ <u>765.58</u>	
	Schedule C - In Kind Contributions	\$0	
	Schedule D - Other Income	\$ 4.94	
	Total of all receipts	\$ <u>5215.89</u>	
3.	Total Monetary Receipts (A+B+D)		\$ <u>5215.89</u>
4.	Candidate's Personal Contribution t	o Own Campaign	\$ 0
5.	Monetary Loans to Candidate or Comm Reporting Period	ittee During	\$
6.	Monetary Loans Repaid During Report	ing Period	\$0
7.	Expenditures - Schedule E		\$ <u>8377.80</u>
8.	Unpaid Obligations - Schedule F	\$	
9.	Amount on hand at the close of this This should equal lines (1+3+4+5)-(	reporting period.	\$ 264.02